



# Roseman University of Health & Sciences

## Student Health Insurance Plan (SHIP) 2023-2024

### Questions

#### Eligibility & Enrollment

Academic Health Insurance Services  
(800) 537-1777

#### Benefits

UnitedHealthcare Insurance Company  
(800) 767-0700

### Insurance ID Card

Visit [myaccount.uhcsr.com](https://myaccount.uhcsr.com) to set up an account, or download the UHCSR mobile app from your preferred app provider!

**Carry your ID card with you at all times!**

### Getting Care

To locate a provider in the UHC Choice Plus PPO Network, visit [uhcsr.com/RUHS](https://uhcsr.com/RUHS) or call (800) 767-0700.

### More Information

For more information, please visit [roseman.mycare26.com](https://roseman.mycare26.com)

### Eligibility

All students at the University who are registered and attending classes in a program that has an Experiential component remaining to be completed are automatically enrolled in this insurance plan at the start of their program, or the start of the plan year, unless proof of comparable coverage is provided via the Student Waiver Portal.

Eligible students who do enroll may also insure their Dependents. Eligible Dependents are the student's legal spouse or Domestic Partner and dependent children under 26 years of age. See the Definitions section of the Certificate for the specific requirements needed to meet Domestic Partner eligibility.

The student must actively attend classes for at least the first 31 days after the date for which coverage is purchased. Home study, correspondence, and online courses do not fulfill the eligibility requirements that the student actively attend classes. The Company maintains its right to investigate eligibility or student status and attendance records to verify that the Policy eligibility requirements have been met.

### What's Covered

- Doctor visits
- Emergency expenses
- Surgery, in- and outpatient
- Preventive care
- Tests, procedures, and lab services, such as X-rays and blood draws
- Pregnancy and maternity
- Prescription drugs

**Limitations, Deductibles, Coinsurance, and Copays may apply.** Please see the Plan Certificate for full benefit details. If there are any discrepancies between this document and the Plan Certificate, the Plan Certificate will govern.

**Coinsurance** is the cost sharing between what the insurance pays and what you pay. This insurance plan pays 80% of Allowed Amount when you use **UnitedHealthcare (UHC) Choice Plus PPO** providers and 60% of the Allowed Amount when you use out-of-network providers.

## Benefits

	UNITEDHEALTHCARE CHOICE PLUS PPO PROVIDER YOU WILL PAY <sup>1</sup>	OUT-OF-NETWORK PROVIDER YOU WILL PAY AT LEAST <sup>2</sup>
Deductible	\$450 per Person, per Policy Year	\$800 per Person, per Policy Year
Office Visit <sup>3</sup>	\$30 Copay per visit	\$45 Copay per visit
Urgent Care <sup>3</sup>	\$50 Copay per visit (Deductible waived)	\$75 Copay per visit (Deductible waived)
Hospital Room & Board	20%	40%
Emergency Room <sup>3</sup>	\$100 Copay per visit (Deductible waived) (Copay waived if admitted)	\$100 Copay per visit (Deductible waived) (Copay waived if admitted)
Prescription Drugs <sup>4</sup>	Tier 1: \$20 Copay Tier 2: \$40 Copay Tier 3: \$55 Copay	40%, then Generic: \$20 Copay Brand Name: \$40 Copay
Out-of-Pocket Maximum	\$6,850 per Person \$12,000 per Family per Policy Year	\$15,000 per Person \$22,000 per Family per Policy Year

<sup>1</sup> Using UHC Choice Plus PPO providers will cost you less because they accept discounted fees for covered services. You are required to pay your portion of cost sharing.

<sup>2</sup> Using out-of-network providers may cost you more money! Coinsurance is payable of the Allowed Amount, the normal cost the provider would charge for services in the absence of insurance. Some out-of-network providers charge more than the Allowed Amount and you will be responsible for these excess amounts over the listed Coinsurance.

<sup>3</sup> Not subject to Deductible.

<sup>4</sup> Up to a 31-day supply per prescription; Deductible waived.

## What's Included

- Access to 24-hour Medical and Mental Health Telemedicine Services
- Coverage when traveling
- Academic Emergency Services\*

\*Academic Emergency Services and AD&D coverage are underwritten by 4 Ever Life International Limited and administered by Worldwide Insurance Services, LLC, separate and independent companies from Academic HealthPlans, Inc. (AHP).

This document contains a summary of your school's Student Health Insurance Plan benefits and restrictions as of the date of its publication; the summary document may differ from the benefits in the approved Plan Certificate. The final Plan Certificate policy may be pending approval by applicable federal and state regulatory authorities. The final approved Plan Certificate is accessible upon approval at [rosemanschools.com/mycare26.com](https://rosemanschools.com/mycare26).

Academic HealthPlans, Inc. (AHP) is an independent company that provides program management and administrative services for the student health plans of UHCSR.